UNITED STATES DISTRICT COURT

DISTRICT OF OREGON

PORTLAND DIVISION

United States of America,		Case No. 3:12-CV-02265-SI	
Plaintiff		Public Comment F Settlement Agreen	Form Regarding Proposed nent
vs. City of Portland,		Submitted by:	
		Your First Name:	
Defendant.		Your Last Name:	
		Your Organization	n (if any):
(single-sided). If you would like to submappropriate box at the end of this form. I relevant to the Court's decision in this malready received by the Court. A copy of link: http://www.justice.gov/usao/or/Civital Topics covered by the Proposed Settles apply to the comments you are submit	Pursuant to Court of atter, and may be left the proposed setted th	order, live testimony in imited to evidence the lement agreement is a ent.html. are listed below. Plet's consideration.	may be restricted to matters that are at is not cumulative of evidence available online at the following
[] Use of Force Policy (General) [] Electronic Control Weapons [] Use of Force Reporting [] Use of Force Supervisory Investigations and Reports [] Compliance Audits Related to Use of Force	[] Crisis Intervention Training		[] CRC Appeals
	[] Crisis Interver	Prevention Team	[] Discipline [] Communication with Complainant
	[] Service Coord		and Transparency
	[] Bureau of Emergency Communication	ergency	[] Community Engagement (General [] Community Oversight Advisory
[] Training (General)	[] Employee Info	•	Board [] Compliance Officer and
[] Mental Health Services (General)	[] Officer Account		Community Liaison
[] Crisis Intervention (General) [] Behavioral Health Unit and Advisory	[] On Scene Pub	· ·	[] PPB Compliance Coordinator [] Agreement Implementation and
Committee	Statements and In	nterviews	Enforcement

Based upon the boxes you checked above, please clearly describe the specific areas of your concern regarding the fairness, adequacy, and reasonableness of the proposed settlement agreement which you would like to bring to the Court's attention. If attaching additional pages, you are limited to 20 pages (single-sided):			

Are you (or is your organization) represent	nted by an attorney? [] Yes [] No.
Attorney's Name:	Attorney's Phone Number:
Attorney's Mailing Address:	
Council, or the U.S. Department of Justic you are now submitting to the Court? []	mments or oral testimony to the City of Portland, City te (including the United States Attorney) on the matters Yes [] No. If yes, please describe whether you submitted and the date of your prior submission of comments and/or
In addition to the written comments you a testimony to the matters you have submit	are submitting, do you also request to provide oral ted in writing? [] Yes [] No.
Your Signature:	Date:
Your Title (if any):	
Your Mailing Address:	
Your Email Address:	
Your Phone Number(s):	
any attachments must be received by the Cledate] at 4:30pm. All written com Copies may be made available to the public	t consideration, the original and one (1) copy of this form and erk of the Court, Civil Intake counter*, no later than [insert ments received will be kept on file until this case is closed. and the parties, but will not become part of the official Court ines otherwise. You may submit your form by certified first address:

Clerk of Court, Civil Intake
United States District Court, District of Oregon
1000 SW Third Ave., Suite 700
Portland, OR 97204

^{*} The Clerk's office cannot answer any questions regarding this form. If you have specific questions regarding this form, please contact the United States Attorney's Office at 503-471-5577, or at usaor.civilrights@usdoj.gov.

^{*} La oficina del secretario del tribunal no puede responder a preguntas acerca de este formulario. Si usted tiene preguntas específicas sobre este formulario, por favor póngase en contacto con la United States Attorney's Office en 503-471-5577, <u>usaor.civilrights@usdoj.gov</u>.